



# TRANSMITTAL FORM

To Office of Patent Correspondence after initial filing



Application Number	09 865.704
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First Named Inventor	ITO et al.
Group Art Unit	2826
Examiner Name	MONDT, JOHANNES P
Attorney Docket Number	01-149

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
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<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Law Offices of David G. Posz
Signature	
Date	July 29, 2002

## OIPE CERTIFICATE OF HAND DELIVERY

I hereby certify that this correspondence is being hand delivered to and deposited with the USPTO at the Customer Service Window, Office of Initial Patent Examination, Crystal Plaza Building, 1800 27th Street, Suite 222, Arlington, VA 22206 on the following date:

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